

153 sicknesses were the result sometimes of malicious practices on the part of ogresses (*vehine hae*); sometimes, of evil influences that had entered the mother during the time of pregnancy through food that she ate or through other contact with something belonging to the woman; sometimes the evil influences were supposed to come to the child through the father.

NATIVE MALADIES

164 The ailments of the natives prior to European contact were very few. My time was too limited to make careful investigations with regard to just what maladies were known in the early days, and little attention was given to the question of the introduction and spread of disease brought by visitors, the causes of depopulation, and the like. Père Pierre Chaulet was a doctor of medicine as well as a Catholic priest. In a manuscript which he left (4) he writes that, according to the natives, the only maladies in the ancient days were colds (*hapu*), asthma (*hekei*), a kind of venereal malady (*pa'atila*) [described by a modern informant as consisting of sores, which attacked the mouth, nose and private parts], venereal ulcers (*ukako*), venereal blotches (*una*), bubo (*ko atua*), thrush (*ke'a*), pimples and pustules (*pata*), blindness (*mata po*), and deafness (*putu'i*). According to this manuscript, all other maladies besides these were introduced. Basings one's conclusions on the rules of *tapu*, one is led to believe that there was something resembling leprosy (*kovi*, *mohoi*) in the ancient days, and the same reasoning applies to insanity, violent colics, and the deep ulcers or carbuncles (*puku*). The leprosy that afflicts many natives today was brought by Chinese; influenza, venereal diseases, and so on, by whites.

158 Certain manifestations of violent insanity or madness are described by Père Pierre (4). The first was known by the natives as *tutu*. A man afflicted with this madness would rush about the valley, carrying the head of a dead person in his hand and throwing stones at people. An evil spirit was supposed to have entered his body. If a woman were so afflicted, it was thought to be a *fanaua* spirit that had entered her.

A more violent and dangerous insanity was called *nei*. A man so afflicted would clothe himself in green coconut leaves split into small strips, wallow in the mud, rub himself all over with, and sometimes eat, human excrement, and, carrying the head of a dead person, would rush about frothing at the mouth and crying, "*Vo, vo, vo, vo, vo, vo, vo, pu, pu, pu, pu, pu, pu!*" Such a one would catch women, tickling them under the arm-pits in order to be able to attack them and would eat their flesh. It is said that anything red would throw him into a frenzy. This madness was supposed to attack individuals especially at the time when the

flamboyant tree (*kenae*, *Erythrina indica*) was in flower, and to have been an hereditary affliction. 158

A modern Nuku Hiva informant told me of persons who run wild (*koea* or *horai*) sometimes going into desert regions to live.

TREATMENT OF DISEASE

DIVINATION OF THE CAUSE OF SICKNESS

Practitioners who were called upon to divine the cause of sickness and the like through possession were called, in general, *tau'a*. Those who made the god or spirit enter into their bodies through their mouths, so that they might prophesy and answer questions regarding sickness and death, were specifically called *pa'e'a*. These appear usually, if not always, to have been women. Their practice was spoken of as *ha'a topa te etua*, to cause the god to fall, or *ha'a u'u te etua*, to make the god enter. Dordillon's dictionary (8) gives *tihoka* as the term for the descent of a god into the body of a person. 756 757

On Hiva Oa the practice of a *pa'e'a* was described as follows: If someone were ill, a woman whose profession it was to divine the cause of sickness would be sent for. She would come and spend the night at the house of the sick person, or the sick person would be taken to a dark place outside the sleeping house. When the *pa'e'a* went through her experience of possession, there was always a large crowd of people looking on. The *pa'e'a* would open her mouth very wide and the god would enter her stomach through it. She would then speak in a whining voice, which was supposed to be that of the god, telling the cause of sickness and the probability of recovery. 755 757

Père Pierre (4) says that such practitioners worked only at night, in order that the *tau'a* might better hide the jugglery connected with his practice. After a piece of cloth had been laid out in the house of the sick person and the lights were put out, the practitioner (*tau'a*) would draw himself up to the rafters of the house, and stirring the thatch to make a rustling, would make a noise with his lips. These sounds were supposed to be made by the god. He would then let himself fall with a thud upon the cloth that had been spread out—the sound of his landing was thought to mark the descent of the god. In his natural voice, the *tau'a* would then ask, "Who are you?" In a false voice, he would reply, "I am N—," giving the name of some deity. Assuming again his natural voice, he would ask why the patient was sick, and a reply would come in a false voice. This, according to Père Pierre, was called *etu'a ha'a topa*, meaning, to cause the god to descend for consultation. It is not certain in my mind whether this is a description of the same practice as that given above,

622 stant threat of other strong households, and if the chief became unpopular, allegiance would be shifted to another powerful household head.

562 All positions except those of ceremonial priest, war leader, and *tuhunga* were open to women, although a woman of high status usually had to be an eldest child. Sex lines were not sharply drawn, and a girl was even sometimes adopted as a first child. This was usually in the case where two families wished to unite their lines. Primogeniture and skill were more important than sex in determining social status. The high status of women, it should be noted, was out of proportion to their economic importance.

LIFE CYCLE OF THE INDIVIDUAL

843 The state of pregnancy brought additional prestige to the woman. At this time she exercised control over the head husband as well as the secondary husbands. He became subject to various taboos as she became pregnant. I did not discover whether or not intercourse continued after pregnancy began, but there was no idea that the child was fed by the father through the act of intercourse. The father had to stay near the mother to protect her in the latter months of pregnancy. Both parents had to observe certain food taboos.

Deaths during pregnancy and labor were frequent, which occasioned much anxiety and speculation among the natives. [76] They believed that the deaths were caused by malevolent magic or possession by evil spirits. There was also not infrequent occurrence of feigned pregnancy, which was undoubtedly of neurotic origin and may have been motivated by the desire on the part of the woman to exercise the privilege of control over chief and secondary husbands that went with the state of pregnancy. When the feigned pregnancy failed to materialize it was believed that the child had been carried away by the *vehini-hai* (female ogres) or that a *fanaua* was responsible.

During the latter stages of pregnancy the household head was required to stay near the house to guard against evil influences. 844 When the birth was due, a small house was built for

776 nonrelative, a spirit who had fallen in love with the woman. After death her spirit was united with his, as in marriage, a relationship which might or might not be unpleasant to her. *Fanaua* of the second type seemed to be more numerous and more active, and more to be dreaded than those of the first.

754 The *fanaua* attacked other women at the bidding of his
776 woman and also protected her from attacks of other *fanaua*. The techniques of *fanaua* attack were primarily connected with pregnancy. The *fanaua* might destroy the child in the womb (cases of neurotic symptoms of imaginary pregnancy were, as has been said, a fairly common phenomenon here) or cause the woman to die, during either pregnancy or childbirth. Practically all such deaths were explained on this basis.

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The woman knew she had a *fanaua* by the fact that a spirit came to her in dreams, frequently of an erotic nature. Other people knew that she had a *fanaua* by observing what happened to women who antagonized her. Although the woman herself never announced the fact, the knowledge that she was being aided by a spirit spread around the community. The wife of my craft instructor had a *fanaua* of minor power, the spirit of her father, and other women did not fear her much; but the wife of the pastor had one who had been a paramount chief of the island of Tahu Ata some two hundred years before. This spirit was very powerful, and the pastor's wife was feared accordingly. The women were very reticent about the whole *fanaua* belief, probably because it was a source of great anxiety and mutual suspicion.

Offerings were made to living women who were known to have *fanaua* in order to keep the familiar from working harm. A woman who had a *fanaua* was welcomed by the males of the same household because such a familiar offered the most direct method for protection of property. The woman's familiar never operated against her husbands and could even be invoked to help them indirectly by attacking women of other households whose men had wronged them. In one instance, a chief had

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of the opposite sex. In mixed company ke'a, mo'e piki, or hano are used.

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During the act, married women display their excitement with more abandon than in the premarital period.

In marital sexual relations, there is no after-play. Both individuals go out and wash, one after the other, and then may go to sleep or resume sexual intercourse.

Impotency among robust males below the old-age level is relatively rare. During our stay, we only encountered one male who suffered from this condition. Another historic case of a well-known chief who was impotent with his wife was recounted. In the one case observed, the individual was married to an attractive woman who remained with him, but /67/ compensated by engaging in extramarital intercourse with high frequency, often making little attempt to conceal her liaisons from her husband. He displayed an attitude of resignation and often disinterest concerning her unions with his personal friends, but became irate when he suspected she was having relations with individuals that he did not like. His relations with his wife were limited to mutual oral stimulation of the genitals, performed infrequently. The rest of the community regarded him with some pity, often expressing wonderment as to the basis of his condition, in view of the fact that he had won renown as a youth for excessive virility and potency. His appellation was Hati - "Broken" - an obvious reference to his affliction. During our stay, Hati appeared to be extremely maladjusted. His conversation was often irrational, and he was obsessed with the topic of sexual potency. He drank to excess by the culture's standards, remaining drunk throughout a good part of the day, several days a week. He worked rarely, and was an indifferent worker when he was employed. Shortly after our return to the United States, we received information that he had developed a full-blown psychosis, necessitating hospitalization.

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Impotency in elderly males is not regarded as unusual. Oral stimulation is practiced in such cases, as in that cited above.

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